

PTO/SB/21 (09-04)

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**TRANSMITTAL  
FORM**

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Total Number of Pages in This Submission

13

Application Number

09/897,295

Filing Date

June 29, 2001

First Named Inventor

William J. Boyle et al.

Art Unit

3743

Examiner Name

Odland, Kathryn P.

Attorney Docket Number

ACSES 56001 (2636P)

**ENCLOSURES (Check all that apply)**

Fee Transmittal Form



Fee Attached



Amendment/Reply



After Final



Affidavits/declaration(s)



Extension of Time Request



Express Abandonment Request



Information Disclosure Statement



Certified Copy of Priority Document(s)

Reply to Missing Parts/  
Incomplete ApplicationReply to Missing Parts  
under 37 CFR 1.52 or 1.53

Drawing(s)



Licensing-related Papers



Petition

Petition to Convert to a  
Provisional ApplicationPower of Attorney, Revocation  
Change of Correspondence Address

Terminal Disclaimer



Request for Refund



CD, Number of CD(s) \_\_\_\_\_



Landscape Table on CD



After Allowance Communication To

Appeal Communication to Board of  
Appeals and InterferencesAppeal Communication to TC  
(Appeal Notice, Brief, Reply Brief)

Proprietary Information



Status Letter

Other Enclosure(S) (Please Identify  
Below):

Postcard

Remarks

CUSTOMER NO. 24201

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm Name

FULWIDER PATTON LEE &amp; UTECHT LLP

Signature

Printed name

Thomas H. Majcher

Date

November 29, 2004

Reg. No.

31,119

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Signature

Typed or printed name

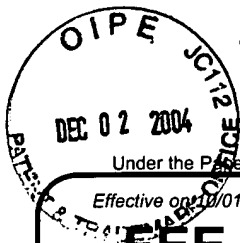
Thomas H. Majcher, Reg. No. 31,119

Date

November 29, 2004

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (11-04)

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Effective on 10/01/2004. Patent fees are subject to annual revision.

**FEE TRANSMITTAL**  
**For FY 2005**☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$) 18.00**Complete if Known**

Application Number	09/897,295
Filing Date	June 29, 2001
First Named Inventor	William J. Boyle et al.
Examiner Name	Odland, Kathryn P.
Art Unit	3743
Attorney Docket No.	ACSES 56001 (2636P)

**METHOD OF PAYMENT** (check all that apply)☒ Check ☐ Credit Card ☐ Money Order☒ Deposit Account ☐ NoneDeposit  
Account  
Number

06-2425

Deposit  
Account  
NameFulwider Patton Lee & Utecht LLP  
Los Angeles, California

The Director is authorized to: (check all that apply)

- ☐ Charge fee(s) indicated below
- ☐ Charge fee(s) indicated below, **except for the filing fee**
- ☒ Charge any additional fee(s) or any underpayment of fee(s) under 37 CFR 1.16 and 1.17
- ☒ Credit any overpayments

to the above-identified deposit account.

☐ Other (please identify): \_\_\_\_\_**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.****FEE CALCULATION****1. BASIC FILING FEE**

Fee Description	Fee (\$)	Small Entity Fee (\$)	Fee Paid
Utility filing fee	790	395	
Design filing fee	390	175	
Plant filing fee	550	275	
Reissue filing fee	790	395	
Provisional filing fee	160	80	
<b>Subtotal (1) \$</b>			<b>0.00</b>

**FEE CALCULATION** (continued)**2. EXTRA CLAIM FEES**

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20	18	9
Each independent claims over 3	88	44
Multiple dependent claim	300	150
For Reissues, each claim over 20 and more than in the original patent	18	9
For Reissues, each independent claim more than in the original patent	88	44

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
-20 or HP = 1	x 18	=	18.00
HP=highest number of total claims paid for, if greater than 20			

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
-3 or HP =	x	=	
HP=highest number of independent claims paid for, if greater than 3			

Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)

**Subtotal (2) \$** 18.00**3. OTHER FEES**

Fee Description	Fee (\$)	Small entity Fee (\$)	Fee Paid (\$)
1-month extension of time	110	55	
2-month extension of time	430	215	
3-month extension of time	980	490	
4-month extension of time	1,530	765	
5-month extension of time	2,080	1,040	
Information disclosure stmt. fee	180	180	
37 CFR 1.17(q) processing fee	50	50	
Non-English specification	130	130	
Notice of Appeal	340	170	
Filing a brief in support of an appeal	340	170	
Request for oral hearing	300	150	
Other:			
<b>Subtotal (3) \$</b>			<b>0.00</b>

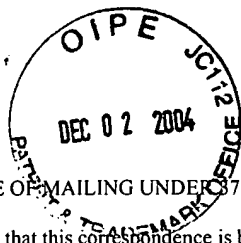
**SUBMITTED BY**

Signature	Thomas H. Majcher	Registration No. (Attorney/Agent)	31,119	Telephone	(310) 824-5555
Name (Print/Type)				Date	November 29, 2004

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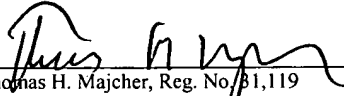
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3743#  
Hw

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Thomas H. Majcher, Reg. No. 81,119

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appln. No. : 09/897,295 Confirmation No. 1994  
Applicant : William J. Boyle et al.  
Filed : June 29, 2001  
Art Unit : 3743  
Examiner : Odland, Kathryn P.  
Title : DELIVERY AND RECOVERY SHEATHS FOR MEDICAL  
DEVICES

Docket No.: : ACSES 56001 (2636P) Los Angeles, California  
Customer No. : 24201 November 29, 2004

Mail Stop AMENDMENT  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

AMENDMENT

Dear Sir:

This Amendment is responsive to the Office Action of August 27, 2004, the response for which is due November 29, 2004.

Claims start on page 2.

Remarks start on page 9.

12/03/2004 MAHMED1 00000027 09897295

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18.00 OP